## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10 810199

| CLAIMS AS FILED - PART I                     |   |  |                                   |                                       |                  |  |          |                                  |                        |                   |                    |                        |
|--|---|--|-----------------------------------|---------------------------------------|------------------|--|----------|----------------------------------|------------------------|-------------------|--------------------|------------------------|
| (Column 1) (Column 2)                        |   |  |                                   |                                       |                  |  |          | SMALL ENTITY                     |                        |                   |                    | R THAN                 |
| TOTAL CLAIMS                                 |   |  | - 0                               | 26                                    |                  | (Column 2)                                   |          | TYPE                             |                        | OF                | SMALL              | . ENTITY               |
|  |   |  | 16                                | 26                                    |                  | ·  |          | RATE                             | FEE                    | _ -               | RATE.              | FEE                    |
| F  | OR<br>—————   | <del></del>                                | NUMBE                             | NUMBER FILED                          |                  | NUMBER EXTRA                                 |          | BASIC FI                         | EE 385.0               | OF                | BASIC FEE          | 770.00                 |
| T  | OTAL CHARGE   | EABLE CLAIMS                               | 26 m                              | 26 minus 20=                          |                  | . 6  |          | X\$ 9=                           |                        | OR                | X\$18=             | 108                    |
| IN   | DEPENDENT   | CLAIMS                                     | 2                                 | 2 minus 3 =                           |                  |  |          | X43=                             |                        | OR                | X86=               | 1                      |
| М  | JLTIPLE DEPE  | ENDENT CLAIM F                             | PRESENT                           | •                                     |                  |  |          | +145=                            | 1                      | OR                |                    |                        |
| * If the difference in column 1 is less that |   |  |                                   | ero, enter                            | "0" in (         | column 2                                     | Į        | TOTAL                            |                        | OR                |                    | 878                    |
| CLAIMS AS AMENDED - PART II                  |   |  |                                   |                                       |                  |  |          |                                  |                        |                   | OTHER              | THAN                   |
|  |   | (Column 1)                                 |                                   | (Colum                                | nn 2)            | (Column 3)                                   | 3) SMAL  |                                  | . ENTITY               | OR                | SMALL              |                        |
| AMENDMENT A                                  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                   | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | BER<br>USLY      | PRESENT<br>EXTRA                             |          | RATE                             | ADDI-<br>TIONAI<br>FEE | -]                | RATE               | ADDI-<br>TIONAL<br>FEE |
| NON  | Total   | *  | Minus                             | **                                    |                  | =  |          | X\$ 9=                           |                        | OR                | X\$18=             |                        |
| AME  | Independent   | *  | Minus                             | •••                                   |                  | <u>                                     </u> |          | X43=                             |                        | OR                | X86=               |                        |
|  | FIRST PRES  | ENTATION OF M                              | ULTIPLE DE                        | PENDENT                               | CLAIM            |  |          | . 1 45                           |                        |                   | 000                |                        |
|  |   |  |                                   |                                       |                  |  |          | +145=                            |                        | OR                | +290=<br>TOTAL     |                        |
|  |   |  |                                   |                                       |                  |  |          | DDIT. FEE                        |                        | OR ,              | ADDIT. FEE         |                        |
| 7  |   | (Column 1)                                 | <del></del>                       | (Colum                                |                  | (Column 3)                                   | _        | •                                |                        |                   |                    |                        |
| AMENDMENT B                                  |   | REMAINING<br>AFTER<br>AMENDMENT            |                                   | NUMBI<br>PREVIOL<br>PAID FO           | ER<br>JSLY       | PRESENT<br>EXTRA                             |          | RATE                             | ADDI-<br>TIONAL<br>FEE |                   | RATE               | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •  | Minus                             | **                                    |                  | =  |          | X\$ 9=                           | ,                      | OR                | X\$18=             |                        |
|  | Independent   | <u> </u>                                   | Minus                             | ***                                   |                  | =  | F        | X43=                             |                        | OR                | X86=               |                        |
|  | FIRST PRESE   | NTATION OF ML                              | JLTIPLE DEP                       | ENDENT C                              | CLAIM            |  | $\vdash$ |                                  | <del></del>            | l <sup>on</sup> l |                    |                        |
|  |   |  |                                   |                                       |                  |  | Ŀ        | +145=                            |                        | OR                | +290=              |                        |
|  |   |  |                                   |                                       |                  |  | AD       | TOTAL<br>DIT. FEE                |                        | OR A              | TOTAL<br>DDIT. FEE |                        |
|  |   | (Column 1)                                 |                                   | (Column                               | 12)              | (Column 3)                                   |          | · .                              |                        |                   |                    |                        |
| יייין רואוי כי                               |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                   | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R<br>SLY         | PRESENT<br>EXTRA                             |          | 1.1                              | ADDI-<br>TIONAL<br>FEE |                   | RATE               | ADDI-<br>TIONAL<br>FEE |
| ֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓        | Total .   | •  | Minus                             | **                                    |                  | =  | <b></b>  | <b>(\$</b> 9=                    |                        | OR                | X\$18=             |                        |
| 1  | ndependent  | •  | Minus                             | ***                                   |                  | =  | $\vdash$ |                                  |                        | <sup>U</sup> -    | <del></del> +      |                        |
| 1  | IRST PRESE  | NTATION OF MU                              | $\vdash$                          | X43=                                  |                  | OR   | X86=     |                                  |                        |                   |                    |                        |
| . 14 -                                       | ho onto in ant -  |  |                                   |                                       |                  | <del></del> .                                | +        | 145=                             |                        | OR                | +290=              |                        |
| - II I                                       | If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |                                   |                                       |                  |  |          |                                  |                        |                   | TOTAL<br>DIT. FEE  |                        |
| Th   | e "Highest Numl   | nber Previously Pai<br>per Previously Paid | o For IN THIS<br>For" (Total or I | SPACE is le<br>Independent)           | ss than is the h | 3, enter *3.*<br>ighest number f             |          | OIT. FEE <b>L</b><br>in the appi | ropriate box           |                   |                    |                        |
|  |   |  |                                   |                                       |                  | •  |          |                                  |                        |                   |                    | 1                      |